

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P19653 (5)
1. Corporation Name
FARM PLAN CORPORATION

Principal Place of Business % DEERE & CO TAX DEPT JOHN DEERE ROAD MOLINE IL 61265	Mailing Address % DEERE & CO TAX DEPT JOHN DEERE ROAD MOLINE IL 61265
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/15/1988	
				4. FEI Number 36-2927535	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JARRETT, THOMAS K.	1.2 NAME	
STREET ADDRESS	4022 E 61ST BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	DAVENPORT IA	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ORR, MICHAEL P.	2.2 NAME	
STREET ADDRESS	209 MCCLELLAN BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	DAVENPORT IA	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COTTRELL, FRANK S	3.2 NAME	
STREET ADDRESS	2718 30TH ST C	3.3 STREET ADDRESS	
CITY-ST-ZIP	MOLINE IL	3.4 CITY-ST-ZIP	
TITLE	RT	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, NATHAN J	4.2 NAME	
STREET ADDRESS	4404 LORTON AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DAVENPORT IA	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERTSON, JAMES S.	5.2 NAME	
STREET ADDRESS	3015-36TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	MOLINE IL	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANE, ROBERT W	6.2 NAME	
STREET ADDRESS	JOHN DEERE RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	MOLINE IL	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  4/20/98

CR2E034 (10/97)

May 1997

FARM PLAN CORPORATION

OFFICERS & DIRECTORS

Officer & Title

Address

President

Michael P. Orr
479-62-0469

Home: 209 McClellan Blvd, Davenport, IA 52803
Work: John Deere Road, Moline, IL 61265

Vice President

James R. Heseman
343-40-4976

Home: 14152 Lake Shore Dr., Clive, IA 50235
Work: 1415 28th Street, West Des Moines, IA 50265-0090

Robert W. Lane
228-68-5832
Patrick E. Mack
483-58-4853

Home: 4404 Lorton Ave., Davenport, IA 52807
Work: John Deere Road, Moline, IL 61265
Home: 21 Grove Circle, Madison, WI 53719
Work: 8402 Excelsior Drive, Madison, WI 53717-1923

Secretary

Frank S. Cottrell
522-60-3681

Home: 2718-30th Street Court, Moline, IL 61265
Work: John Deere Road, Moline, IL 61265

Treasurer

Steven E. Warren
361-38-1143

Home: 1540 Country Club Blvd., Clive, IA 50325
Work: 14152 Lake Shore Dr., Clive, IA 50235

Asst. Treasurer

Nathan J. Jones
392-60-8531

Home: 1805 Harding Ct. Bettendorf, Iowa 52722
Work: John Deere Road, Moline, IL 61265

Asst. Secretary

Thomas K. Jarrett
329-40-9221
William A. Rotzien
383-46-2102
Steven A. Holmes
379-58-9517
Richard J. Cullen
383-50-3243

Home: 4022 E. 61st Blvd. Davenport, IA 52807
Work: John Deere Road, Moline, IL 61265
Home: 2181 St. Andrews Circle, Bettendorf, IA 52722
Work: John Deere Road, Moline, IL 61265
Home: 2906 Maple Lawn, Madison, WI 53719
Work: 8402 Excelsior Drive, Madison, WI 53717-1923
Home: 10 Velie Dr., Moline, IL 61265
Work: John Deere Road, Moline, IL 61265

Directors

Hans W. Becherer
364-34-3719
Frank S. Cottrell
522-60-3681
Robert W. Lane
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Michael P. Orr
479-62-0469
Steven E. Warren
361-38-1143

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Work: 14152 Lake Shore Dr., Clive, IA 50235